

ORDER FOR SUPPLIES OR SERVICES					Form Approved		Page 1 Of 5	
1. Contract/Purch Order No.		2. Delivery Order No.		3. Date Of Order		4. Requisition/Purch Request No.		5. Certified for National Defense Under DMS Reg 1 Priority DOA5
GS28F0005J		DAAE20-99-F-0070		1999SEP09		SEE SCHEDULE		
6. Issued By			Code	7. Administered By (If other than 6)			Code	8. Delivery FOB  <input type="checkbox"/> Dest <input checked="" type="checkbox"/> Other  (See Schedule if other)
TACOM-ROCK ISLAND AMSTA-AC-PCH-C JAN DAY (309) 782-3472 ROCK ISLAND IL 61299-7630  EMAIL: DAYJ@RIA.ARMY.MIL			W52H09	DCMC PHILADELPHIA PO BOX 11427 PHILADELPHIA PA 19111-0427  SCD C PAS NONE ADP PT SC1012			S3915A	
9. Contractor			Code	Facility Code		10. Deliver To FOB Point By (Date)		11. Mark If Business Is  <input type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned
ATD-AMERICAN CO 135GREENWOOD AVE WYNCOTE PA 19095-1396			5A439			SEE SCHEDULE		
					12. Discount Terms			
					13. Mail Invoices To		See Block 15	
14. Ship To			Code	15. Payment Will Be Made By			Code	Mark All Packages And Papers With Contract Or Order Number
SEE SCHEDULE				DFAS-COLUMBUS CENTER DFAS-CO-JNF/NEW DOMINION P O BOX 182041 COLUMBUS OH 43218-2041			SC1018	
16. T O Y R P D E E R O F	Delivery	<input checked="" type="checkbox"/>	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.					
	Purchase		Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation , Dated _____, furnish the following on terms specified herein.					
			Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.					
Name Of Contractor			Signature			Typed Name And Title		Date Signed
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:								
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE								
18. Item No.	19. Schedule Of Supplies/Service			20. Quantity Ordered/ Accepted*	21. Unit	22. Unit Price	23. Amount	
	SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price  KIND OF CONTRACT: Supply Contracts and Priced Orders							
* If quantity accepted by the Government is sameas quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. United States Of America			25. Total	\$4,493.80
				By: HOWARD LEWIS LEWISH@RIA.ARMY.MIL (309) 782-3506			29. Differences	
26. Quantity In Column 20 Has Been					27. Ship. No.	28. D.O. Voucher No.	30. Initials	
<input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted  _____ Date _____ Signature Of Authorized Govt Representative					<input type="checkbox"/> Partial <input type="checkbox"/> Final	32. Paid By	33. Amount Verified Correct For	
36. I certify this account is correct and proper for payment					<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	34. Check Number	35. Bill Of Lading No.	
37. Received At		38. Received By		39. Date Received	40. Total Containers	41. S/R Account No.	42. S/R Voucher No.	

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-99-F-0070 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 5
<b>Name of Offeror or Contractor:</b> ATD-AMERICAN CO		

SUPPLEMENTAL INFORMATION

- This Delivery Order is awarded against GSA Schedule GS-28F-0005J with ATD-American Company.
- The ATD-American Co. quotation provided by Adams Marketing Company, 10841 Outpost Drive, Gaithersburg, MD 20878 is incorporated as attachment 0001. This attachment contains product description and style numbers, along with quantities, individual unit price, and extended unit price. The cost for furniture and freight is reflected below:

ATD-American/High Point Furniture:	\$4,356.00.
Freight	\$ <u>137.80.</u>
 Total Cost:	 \$4,493.80
- Shipping instructions: All items should be shipped to the following address:

W52H1C  
Rock Island Arsenal  
Building 299  
ATTN: SIORI-IST  
Rock Island, IL 61299-5000

Mark For: QUALITY OF LIFE

Contract number as set forth in Block 2 of page 1 must appear on outside of shipping container and detailed packing list must be included with the shipment.
- The invoice payment is to be sent to:

ATD-American/High Point Furniture  
P.O. PO Box 8500S  
Philadelphia, PA 19178-0001
- All terms and conditions of the listed GSA schedule are applicable to this order.
- Pursuant to a quality approved manufacturer agreement with GSA, the contractor is authorized to issue a Certificate of Conformance covering supplies at time of shipment in accordance with the GSA.

\*\*\* END OF NARRATIVE A001 \*\*\*

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Name of Offeror or Contractor: ATD-AMERICAN CO

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p>0001AA <u>QUALITY OF LIFE-EXEC FURN, GS-28F-0005J</u></p> <p>NSN: 0000-00-000-0000 NOUN: QOL-EXEC FURNIT GS-28F-0005J SECURITY CLASS: Unclassified PRON: M196C036M1 PRON AMD: 02 ACRN: AA AMS CD: SM2A5000000SM2A</p> <p><u>Packaging and Marking</u></p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Destination</p> <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W52H099250QOL1 W52H1C M 2 <u>DEL REL CD QUANTITY DEL DATE</u> 001 12 31-OCT-1999</p> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u> (W52H1C) XR TRANS OFC ATTN SIORI IST ROCK ISLAND ARSENAL ROCK ISLAND IL 61299-5000</p> <p>MARK FOR: QUALITY OF LIFE</p>	12	EA	\$ ** N/A **	\$ 4,356.00
0001AB	<p><u>SHIPPING COSTS</u></p> <p>NOUN: QOL-EXEC FURNIT GS-28F-0005J SECURITY CLASS: Unclassified PRON: M196C036M1 PRON AMD: 02 ACRN: AA AMS CD: SM2A5000000SM2A</p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Destination</p> <p><u>Deliveries or Performance</u> DLVR SCH PERF COMPL <u>REL CD QUANTITY DATE</u> 001 12 31-OCT-1999</p> <p>\$ 137.80</p>	12	EA		\$ 137.80

**CONTINUATION SHEET****Reference No. of Document Being Continued**

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MOD/AMD

**Name of Offeror or Contractor:** ATD-AMERICAN CO

## CONTRACT ADMINISTRATION DATA

										JOB				
LINE	PRON/	OBLG								ORDER	ACCOUNTING		OBLIGATED	
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>						<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>		
0001AA	M196C036M1	AA	2	97	X4930AC5GX6D6D02PSM2A5031EC	S11116				98WQ9L	W52H09	\$	4,356.00	
SM2A5000000SM2A														
0001AB	M196C036M1	AA	2	97	X4930AC5GX6D6D02PSM2A5031EC	S11116				98WQ9L	W52H09	\$	137.80	
SM2A5000000SM2A														
												TOTAL	\$	4,493.80
SERVICE										ACCOUNTING		OBLIGATED		
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>						<u>STATION</u>	<u>AMOUNT</u>				
Army	AA		97	X4930AC5GX6D6D02PSM2A5031EC	S11116				W52H09	\$	4,493.80			
												TOTAL	\$	4,493.80

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Name of Offeror or Contractor: ATD-AMERICAN CO

LIST OF ATTACHMENTS

List of Addenda	Title	Date	Number of Pages	Transmitted By
Attachment 001	GSA PRICES FOR EXECUTIVE FURNITURE			